

Methodology to Conduct gap analysis with respect to generation and treatment of biomedical waste - Revision 1

Guidelines for Common Biomedical Waste Treatment Facilities was prepared by CPCB with an aim to have uniformity in ensuring site selection, allowing and establishment of a state-of-the-art Common Biomedical Waste Treatment Facilities (CBWTFs), operation as well as verification of compliance to the BMW Rules, 2016 throughout the country. As per the said guideline, SPCB/PCC is required to prepare an inventory or review with regard to the bio-medical waste generation at least once in five years in the coverage areas of the existing CBWTF and conduct gap analysis as per format given in Annexure-I of the guideline.

Further, methodology for conducting gap analysis with respect to generation and treatment of biomedical waste prepared by CPCB and circulated to all SPCBs/PCCs. Accordingly, 12 SPCBs/PCCs have conducted gap analysis and submitted the report to CPCB. However, non-uniformity and ambiguity was observed specifically with regard to the method for extrapolating the data on biomedical waste generation and requirement of adequate treatment capacity in the gap analysis reports submitted by SPCBs/PCCs. Therefore, revised methodology have been prepared with an aim to have uniformity in the method for carrying out the gap analysis by State Pollution Control Boards/Pollution Control Committees.

The methodology for conducting gap analysis may be based on following parameters:

S. No.	Parameters	Details
1.	Coverage area of CBWTF	Mention farthest distance covered by CBWTF
2.	No. of HCFs (Bedded and non-bedded)	In Number
3.	No. of Beds covered	In Number
4.	Total biomedical waste generation (in Kg/day)	<p>The generation of biomedical waste may be calculated by considering following aspects:</p> <p>a) Generation from bedded HCFs: The biomedical waste generation rate may be considered as 277* grams per bed per day</p> <p>b) Generation from non-bedded HCFs: The biomedical waste generation may be considered as 274** grams per day</p> <p>c) Biomedical waste generated from occasional waste generators such as health camps, institutions, vaccination camps etc as defined under CPCB guidelines may also be considered.</p> <p>* Reference: Report on Health-care Waste Management status in countries of the</p>

		<p>South-East Asia Region by WHO which is also nearly equal to the average biomedical waste generation per day per bed as per AR information received from States/UTs.</p> <p>**The value is taken based on the data given by CBWTF Associations regarding current average biomedical waste generation from non-bedded HCFs.</p>
5.	Extrapolate the biomedical waste generation for next 10 years	Linear method may be adopted for extrapolation of biomedical waste generation
6.	Total existing treatment capacity (in Kg/day) (Sum of Incineration Capacity and Autoclave/Microwave/Hydroclave Capacity)	<p>For calculation of existing treatment capacity, maintenance time (not more than 12-18 hrs/month) may be considered for calculating operational hours of equipment as below:</p> <p>a) Operational Hours for static incinerator 20 hrs/day b) Operational hours for Rotary incinerator 22 hrs/day c) 18 cycle per day for autoclave</p> <p>The actual capacity may also be considered as 90% of available capacity keeping 10% margin for diverted/extra waste etc.</p>
7.	Total Biomedical Waste treated and disposed (Kg/day)	Sum of all categories of biomedical waste treated and disposal.
8.	Gap between total extrapolated biomedical waste generation (for next 10 years) and existing biomedical waste treatment capacity	Extrapolated biomedical waste generation minus total existing treatment capacity
